Reich's Character Types: The Hysterical Character

Posted on **July 29, 2014** by **Dr. Patricia Frisch**

This post continues our discussion of Wilhelm Reich's schema of character types. As I stated in the last post, I will add further types from Object Relations Theory to complete the typology at the end of this series. I will present Reich's types initially as he delineated them to give you a clear sense of his system and how he evolves the types out of the psycho-sexual developmental stages. I will eliminate some of the extensive elaboration and specificity within his typology so my readers don't bog down. This post will include historic contextual markers relevant to Reich's theoretical evolution and the development of this specific character type.

As part of the Genital character (**my last post**), Reich includes the **Hysterical Character type**, referenced as: *genitality with anxiety as a subset*. This diagnosis has roots in ancient history and the Middle Ages where *hysteria* was discovered and designated as a medical condition thought particular to women. When Sigmund Freud began his seminal work in the field of psychoanalysis, hysteria was at the forefront of his developing understanding that "medical pathologies" can be traced to the mind. Freud's launching pad was the work of French neurologist, Jean-Martin Charcot, who investigated hysteria in-depth. Serious symptoms like paralysis and fugue states (behaviors displayed, but later not remembered), became an impetus for Freud's research and he published a series of articles on hysteria and the mental etiology of these conditions. Freud delineated how hysterical symptoms are a conversion of psychological stress into physical symptoms, i.e. paralysis, fugue, or selective amnesia. Freud and his student Reich attributed hysterical symptoms, including overdramatic behaviors and emotions, as the unconscious mind's attempt to protect from psychic disturbance.

Reich's discussion of the hysteric type is, of course, influenced by the times he lived in. During the period of his mentorship with Freud and after separating from Freud (1918-1934), Reich incorporated Freud's analytic concept of *libido* or *biological sexual energy* and, after years of research, expanded on it and scientifically validated the existence of biological energy. He ultimately named it Orgone Energy. Freud, on the other hand, moved away from his earlier concept of libido and reduced it to a psychic concept without physical basis.

The recognition of the importance of sexuality as a necessary and healthy function of expression and release was revolutionary in the 1920's. Freud, the father of psychoanalysis, was focused on the etiology of mental illness. Inhibited sexuality was seen as a primary cause of psychological symptoms and, in particular, a major contributor to hysterical symptomatology. Freud, from his study of patients, theorized that neurosis is caused by conflicts between natural sexual and other primitive instincts

and social inhibition and frustration of those instincts. The Victorian Era was the backdrop, with its known, highly moralistic sensibility, as well as initiating a new cultural movement toward romanticism. This cultural context and shift influenced Freud and Reich.

Reich's focus never strayed from his interest in biological sexual energy and, as I stated, he did scientific experiments that confirmed the existence of "real" energy in the body (see Orgasm theory). Building from this platform, he created a comprehensive paradigm that described the characterological and biophysical ramifications of stasis or blockages of energy within our whole system. Reich developed new techniques: *characteranalysis* and later *"vegetotherapy"* that went beyond the limits of psychoanalysis. He coined the terms *character* and *body armor* that supported his mind-body approach to health.

In our times, we have continued in-depth research into the causes of psychological difficulties. It is a complex interplay of forces, including the importance of genetic contributions, family systems, external circumstances, and attachment issues, as described in a plethora of extensive research on attachment theory, all factoring into our psychological condition. I have expanded on Reich's types by utilizing attachment theory to delineate **earlier** developmental passages. These developmental phases are critical and expand on Reich's emphasis that was singularly focused on Oedipal phases and development of sexuality. Blocks in the earlier attachment phases create additional character types formed at earlier developmental sequences.

I give these details so you can understand the historical context and the etiology of Reich's thinking while shedding light on why I expanded on that paradigm to include significant additions to his character typology.

That said, the hysterical character is still relevant and is listed in Personality Disorders in the latest, revised Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, by the American Psychiatric Association published in 2013. In DSM-5, this type is referenced as the Histrionic Personality Disorder, distinguished by *"a pattern of excessive emotionality and attention-seeking"* and includes 8 further descriptors. This type also has higher rates of somatic symptom disorder. Other personality disorders also have propensities for somatization, or displacing psychological problems into somatic/acting-out symptomology of the other traits Reich delineated for the Hysteric Type, as listed in the DSM-5.

As I stated, Reich considered the Hysterical Character a genital character with anxiety. This means that an individual, either male or female, has reached the developmental phase of genitality and is not lodged in an earlier developmentally regressed phase that prevents sufficient maturity. I won't spend time here on a discussion of developmental phases, but suffice it to say that we do develop through phases in a manner that hopefully leads us to a whole self with our body/mind capable of full excitation (aliveness) throughout our system. Sometimes development is stymied and we can't evolve our full potential, thus we are waylaid at a particular point that defines our character type. I will say more on this in future posts.

OK, on we go to further understanding of this character type. The hysterical character has the capacity for genitality, but cannot embody it. That means, for the most part, that this character type does not have serious blockages or armoring throughout the segments of the body (see prior blog series on **Reich's Map of Body Armor**), thus the energy flows down the body to the genitals mostly unobstructed. There is a high level of excitation in the system. Yet they suffer from high anxiety related to this free moving energy and defend by running from real contact, focus, and depth.

Potential etiology defined by Reich and others of his time, states that this individual type may, in the Oedipal phase of development (approximately 3-6 years of age and expressed during teen years), have had difficulties around their budding sexuality – usually with the opposite sex parent. Thus, there wasn't freedom to be affectionate, validated, and sexual in an accepted and supported way. Instead, these feelings and sensations were inhibited by the parent – disapproved of, ignored or actively blocked. There are many ways this story could unfold, but this is the basic playbook.

Characteristics of the Hysteric Type

The hysteric character type exhibits a strong and compelling flight from contact that leads to chronic approach-avoid mechanisms in both relationship and in other areas of their life. They can flit from relationship to relationship, deeply terrified of commitment. The abundance of free energy natural to this type is not fully lived or discharged because it causes too much anxiety to be contained and utilized. Thus, the individual has chronic build-up of energy, experienced as anxiety and acted out in flight, over dramatization, and other behaviors that release it. That build-up leads to constant agitation, restlessness, lack of focus and immaturity. Hysterics are prone to some depression, moodiness and crave stimulation to alter their mood.

This type is driven to seek attention and sometimes do that with flirtatiousness, seductiveness, and provocativeness. Yet, intimacy is not in their reach because they are flighty and immature. Further, hysterics alienate others as they are self- centered and threaten same sex relationships because of their seductive style. Underneath, there are deep abandonment issues so they act-out dependency needs in unhealthy ways.

This type can be very suggestible, often seeks definition through the other, and wants to please as a way of securing a dependency object. There is an imbedded superficiality as their anxiety keeps them on the run so they have trouble digging deep. They have trouble settling into themselves – they are changeable in their behavioral directions, shifting course or feeling on a whim. Hysterics can be devaluing when not in a pleasing, compliant mood.

This type can be described as shallow, as the Self has not developed its full potential due to high anxiety. They can be vivacious in conversation but lack detail, knowledge and depth. Hysterics rely on their appearance to feel good about themselves and put a great deal of attention on looking attractive. With this shallowness, they compensate with dramatic, exaggerated expression of emotions that fill them up and hide the emptiness. They have problems directing themselves intellectually or mastering their full

potential in careers and creativity because superficial values takes precedence. They want immediate gratification and have trouble putting in the hard work of building something substantial.

Let's now discuss how hysterics' armoring manifests in their bodies. They are not prone to dense muscular holding, but rather have very light armoring. Their bodies are soft and pliable, usually in good tone. The tension shifts to various spots. As they can't bind energy with muscular holding and internal contraction, such as tension in the organ system, they are prone to symptoms including somatization. That means they feel physical symptoms and focus on those, usually having an array of physical problems, concerns, pains, and fears of disease.

Because hysterics have fully developed genital phase excitation, and if there are no pregential blocks, their major defenses are contactlessness and flight according to Elsworth Baker, M.D. They can exhibit *frantic behavior*, i.e. being overly emotional or agitated and running around in flighty patterns. If they have a higher level of repression, this type can be overly *calm* with more withdrawal, disconnectedness, and freezing up.

There are shadings to all Reich's character types if blockages in the upper segments are part of the picture, and there usually are. I will discuss these shadings in another post.

Therapy with the hysteric begins with illuminating their tendency toward flight and stopping it. This type can be attracted to a multitude of helpers and run from one healing professional to another, eliciting advice from everyone. This style is not helpful because their suggestibility creates constant confusion.

Point out the superficiality and substitute contact behind their smiling, animated brightness, and overly dramatic style of talking. Discuss the preoccupation with appearance. Often this type over exercises to ensure their ability to seduce. Help them understand the feelings that drive these preoccupations.

As depth is difficult, the hysteric often resists therapy; they don't want to be contained as that interrupts the frantic flight path that is a defense against depression. As the containment stabilizes, then deeper fears and considerations can be faced and felt honestly. Then they can see that their attention seeking and provocative attempts at superficial contact just leaves them empty and more desperate.

Ultimately, hysterics have a good amount of available energy and capacity for aliveness without much armoring. This means that when they get directed, they can accomplish and create a substantial life path and enjoy the intimacy of stable relationships.